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SUBJECT: AVIAN INFLUENZA - A LOOK AT FOUR PROVINCES IN VIETNAM'S MEKONG DELTA

REF: HCMC 855

1. (SBU) Summary. USAID Regional Infectious Diseases Advisor and EconOff visited Can Tho, Hau Giang, An Giang and Dong Thap provinces of the Mekong Delta region in southern Vietnam to assess provincial Avian Influenza (AI) preparedness activities. While outbreaks of AI in poultry and humans in these provinces still could be characterized as sporadic, authorities are nevertheless concerned and are proceeding at a state of heightened alertness. Two immediate worries are surveillance, in particular the need for uniform case definition to identify suspected AI cases, and a coherent public awareness campaign. Local officials expressed interest in USG technical assistance in both of these areas. The USG has committed USD 7.5 million to support the GVN prepare for and respond to an AI pandemic. End Summary.

Planning and Coordination

2. (SBU) During their November 28 - December 1 trip to the Mekong Delta, HCMC EconOff and Bangkok-based USAID Regional Infectious Diseases Advisor learned that provincial measures to combat avian influenza include planning and coordination, surveillance and outbreak response, poultry vaccination, containment and awareness campaigns. Provincial People's Committees have organized their own AI steering committees that meet regularly, with representatives from the departments of Health, Agriculture and Rural Development, Education, and Trade and Investment, as well as the Marketing Management Board, police and others. Coordination between animal and human health authorities takes place via both official and unofficial channels, but when actually tested the coordination network shows some signs of inconsistency.

Surveillance and Outbreak Response

3. (SBU) Provincial officials reported that human and animal health surveillance is carried out at the commune and district levels and is then passed upward to the provincial leadership. However, animal health surveillance is passive and primarily relies on farmers themselves to report poultry deaths. In instances of suspected cases of AI in poultry, the provinces' Bureaus of Animal Health contact the regional office in Can Tho as well as the provincial Department of Health (DoH). The DoH is then responsible for investigating and monitoring the health of the family or individuals exposed to the suspected birds. If a hospital reports a suspected case of AI, it must contact the DoH, which then notifies the local Animal Health Bureau. Provinces compensate farmers for culled or lost poultry, but in some places compensation levels are linked to previous vaccination program compliance. The level of compensation varies depending on the type and age of the bird, but the previously reported level of 15,000 VND (approximately 1 USD) per bird is still a valid benchmark (reftel). In addition to compensation, many provinces also threaten fines for non-compliance and promise rewards for farmers who report on neighbors trying to hide dead chickens and ducks.

4. (SBU) Surveillance in the public health sector is primarily conducted through district or provincial hospitals, with suspected cases reported to provincial Departments of Health. The DoH then notifies a province's AI Steering Committee, its Health Prevention Center, the provincial Bureau of Animal Health, and the Pasteur Institute in HCMC. All the provinces we visited had conducted some AI training for medical staff at least on the district level. When we asked district health care workers what symptoms constitute a suspected AI case, the answers were generally the same: cough, fever, difficulty breathing and exposure to poultry. There appeared to be some disconnect between the pervasiveness of the symptoms and the rarity of suspected cases; if hospital officials were strictly adhering to the case criteria cited - i.e. cough, fever, exposure to poultry, there should be more suspected cases. Medical and health officials reported difficulty in defining uniform case criteria that would be broad enough to ensure early detection, but narrow enough to be manageable. Technical assistance from the United States in this matter would be appreciated, officials said.

Example of a suspected case

15. (SBU) In November 2005, in a suspected AI case in Dong Thap Province, a patient checked into the provincial hospital with fever, cough, and difficulty breathing. An X-ray showed two spots on his lung. The patient informed the medical professionals that four of his six chickens had just died. The patient was isolated, and given Tamiflu and antibiotics. Specimens were sent to the Pasteur Institute for testing, and the Dong Thap Animal Health Bureau was notified. While these measures seem to indicate that human health coordination and surveillance functioned as intended, when we asked the DoH about the results of tests on the poultry in the case, none of the health officials at the meeting knew what had happened to the poultry. As it turned out, the family members of the sick man were so frightened by the incident that they killed their remaining birds and incinerated all of the dead animals. The Pasteur Institute's results came back negative for AI in less than 48 hours, and the patient recovered.

16. (SBU) Comment: This example illustrates some key points about AI preparedness in southern Vietnam:

- as in this specific case, when a patient checks into a hospital, and matches all the case criteria, including exposure to poultry, the surveillance system in place seems to work;
- coordination between animal and human health officials exists, but may be tenuous;
- under current conditions, the Pasteur Institute is able to react quickly;
- hospital staff are adequately trained and equipped to deal with a few AI cases; and
- the general population is aware of the risks of AI to their own health and is willing to cull their birds even before ordered to do so, when an immediate danger is perceived.

The provinces visited would be challenged to handle an outbreak of more than 10 to 30 patients before becoming overwhelmed. End Comment.

Poultry Vaccination

17. (SBU) The poultry vaccination program is completed or is near completion in all four of the Mekong Delta provinces visited. Despite some difficulties with vaccine supplies, shortage of staff, and farmer reluctance to participate, officials reported their provinces have met or surpassed the GVN's target of an 80% coverage rate of the poultry population. Authorities were encouraged by reports that the number of farmers willing to participate in the vaccination program had increased as fears and concerns regarding the effects of the vaccine had dissipated. Farmer compliance with poultry vaccination was linked to government measures such as permission to bring poultry to the market, compensation for culled birds, and other government programs designed to help poultry farmers.

Containment

18. (SBU) There is a nationwide ban on the transportation of and trade in poultry between provinces. Each province has implemented various regulations and measures regarding the sale of poultry within its own borders. Measures include establishing official slaughterhouses and designating health certification stamps for poultry. The purpose of these regulations is to ensure that only healthy, vaccinated poultry is sold at markets, but the process can be laborious and is incomplete in places. The result is a shortage of official poultry markets, which could drive future poultry sales completely underground and make them even more difficult to monitor. For example, in Can Tho City, bringing a bird to market is a seven-step process that requires two certificates. Hau Giang Province does not have an official slaughterhouse yet and presently asks farmers to keep their birds until an official site can be designated.

Public Awareness Campaign

19. (SBU) Raising public awareness about AI was of primary importance to all of the government and medical officials we met. Public health, animal health and medical officials have printed and distributed hundreds of thousands of leaflets and pamphlets. They have created radio messages, TV programs and even megaphone announcements about AI. Authorities said the Ministry of Health (MOH) and Ministry of Agriculture and Rural Development (MARD) provide guidelines for public awareness messages, but wording and format is left up to provincial departments. The result is an awareness campaign that lacks uniformity, has no cohesive message and does not take advantage of opportunities for synergy. Provincial officials agreed that, taking into account the proximity of poultry and people in the countryside, it would be prudent to consider a comprehensive approach that would address both animal and human health aspects

of AI and could be distributed through all government networks.

10. (SBU) Provincial Departments of Health and Animal Health Bureaus have all provided some level of training for staff at the provincial, district, and in some cases, commune levels. It is the job of those trained to return to their offices and train other staff members. When asked what a "typical Vietnamese person" would do when feeling sick with flu-like or other symptoms, the most common answer was "go see a pharmacist." However, pharmacists have not yet been trained in AI prevention, nor did we hear of any plans to include them in public awareness campaigns.

Conclusion

11. (SBU) Comment: Several provinces in Vietnam's Mekong Delta region have established a basic framework to build an effective AI preparedness network. Medical and health officials have benefited from the lessons learned during SARS and are adapting them to AI. Animal health officials understand they are on the frontline of preventing an AI epidemic, as well as minimizing the economic damage AI has already caused to a nation heavily reliant on agriculture. The poultry vaccination campaign and mass culling have provided the MARD's provincial counterparts with practical insight on how mobilize their forces in case of emergency.

12. (SBU) However, these measures are only the beginning, as it is clear each province would find it difficult to cope with more than a handful of human AI cases. Strengthening surveillance and public awareness is essential for strengthening Vietnam's capability to help stem a possible pandemic. Provincial authorities expressed interest in possible USG technical assistance and cooperation in the development of a standardized suspected AI case definition that could produce immediate tangible results, as would the distribution to provinces of professionally prepared public awareness materials. End comment.

13. (U) The USG has committed USD 7.5 million (USD 2.4 million from USAID/USDA; USD 5.1 million from HHS) to help the GVN prepare for and respond to an AI pandemic, including support for GVN's nationwide poultry vaccination campaign, improving the capacity of the public health care system in epidemiological monitoring and surveillance, and raising farmers' awareness and attitudes toward AI.

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